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PTO/SB/17 (07-06)

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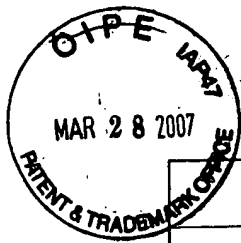
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<b>Effective on 12/08/2004.</b> Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		<b>Complete if Known</b>	
<b>FEE TRANSMITTAL</b> <b>For FY 2006</b>		Application Number	09/424,544-Conf. #8128
		Filing Date	November 24, 1999
		First Named Inventor	Masumitsu INO
		Examiner Name	J. J. Piziali
		Art Unit	2629
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	SON-1582
<b>TOTAL AMOUNT OF PAYMENT</b>	<b>(\$)</b> 320.00		

<b>METHOD OF PAYMENT</b> (check all that apply)	
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card
<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: <u>18-0013</u> Deposit Account Name: <u>Rader, Fishman &amp; Grauer PLLC</u>
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, <b>except for the filing fee</b>
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

<b>FEE CALCULATION</b>							
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>							
	<b>FILING FEES</b>		<b>SEARCH FEES</b>		<b>EXAMINATION FEES</b>		
		<u>Small Entity</u>		<u>Small Entity</u>		<u>Small Entity</u>	
<b>Application Type</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fees Paid (\$)</b>
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
							<u>Small Entity</u>
							<b>Fee (\$)</b>
<b>2. EXCESS CLAIM FEES</b>							<b>Fee (\$)</b>
<b>Fee Description</b>							<b>Fee (\$)</b>
Each claim over 20 (including Reissues)							50
Each independent claim over 3 (including Reissues)							200
Multiple dependent claims							360
							180
<b>Total Claims</b>							<b>Fee Paid (\$)</b>
<u>43</u> - 39 = <u>4</u> x <u>50.00</u> = <u>200.00</u>							
HP = highest number of total claims paid for, if greater than 20.							
<b>Indep. Claims</b>							<b>Fee Paid (\$)</b>
<u>2</u> - 3 = <u>  </u> x <u>  </u> = <u>  </u>							
HP = highest number of independent claims paid for, if greater than 3.							
<b>3. APPLICATION SIZE FEE</b>							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>		<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>		
<u>  </u> - 100 = <u>  </u>	<u>  </u> / 50 = <u>  </u>	<u>  </u> (round up to a whole number) x <u>  </u>		<u>  </u>	<u>  </u>		
							<b>Fees Paid (\$)</b>
<b>4. OTHER FEE(S)</b>							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): 1251 Extension for response within first month							120.00
1202 Claims in excess of Twenty							200.00

<b>SUBMITTED BY</b>			
Signature	<u>[Signature]</u>	Registration No. (Attorney/Agent)	24,104
Name (Print/Type)	Ronald P. Kananen	Telephone	(202) 955-3750
	<u>[Signature]</u>	Date	March 28, 2007



# AMENDMENT TRANSMITTAL LETTER

Docket No.  
SON-1582

Application No.  
09/424,544-Conf. #8128

Filing Date  
November 24, 1999

Examiner  
J. J. Piziali

Art Unit  
2629

Applicant(s): Masumitsu INO, et al.

Invention: LIQUID CRYSTAL DISPLAY

## TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	43	- 39 =	4	x 50.00	200.00
Independent Claims	2	- 3 =		x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Extension for response within first month					120.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					320.00

☒ Large Entity

☐ Small Entity

☐ No additional fee is required for this amendment.

☒ Please charge Deposit Account No. 18-0013 in the amount of \$ 320.00

A duplicate copy of this sheet is enclosed.

☐ A check in the amount of \$ \_\_\_\_\_ to cover the filing fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☒ The Director is hereby authorized to charge and credit Deposit Account No. 18-0013 as described below. A duplicate copy of this sheet is enclosed.

☒ Credit any overpayment.

☒ Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.

*Ronald P. Kananen*  
Attorney/Agent Reg. No.: 24,104

Dated: March 28, 2007

RADER, FISHMAN & GRAUER PLLC  
1233 20th Street, N.W.  
Suite 501  
Washington, DC 20036  
(202) 955-3750